atla an aismatuwa wawifinatia	.				
otloop signature verificatio		REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK			RECFIE USE ONLY
	FORM	Quarterly Rep (Check one	JAN 1 8 2022		
	D-2	Final Report	(Fund balance	State Board of Elections	
TUNOIS		Amendment	of the Repo	Springfield Office	
Full name and co	omplete mailing add	dress of Political Co	CHECK FOR ADDRESS CHANGE	COMMITTEE ID #	
Republican Women Of Rock Island County 500 16th St Rock Island, IL 61201					759 13
E-mail address: [redtrumpetee	er@gmail.cor	n 🗆 c	HECK FOR E-MAIL ADDRESS CHANGE	
REPORTING P	ERIOD CASH A	VAILABLE AT BEGI		ALL POLITICAL COMMITT	
09-2021 12	•	ORTING PERIOD:		STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD OR	STATE BOARD OF ELECTIONS 69 W WASHINGTON ST, STE LL-08
SPAINGFIELD, IL 02/04-4305				SPRINGFIELD, IL 62704-4503 E-MAIL: D2@ELECTIO	CHICAGO, IL 60602-3026
FROM THRU Repeat this amount in SECTION D, Line (A) SECTION A — RECEIPTS				SECTION B — E	
1. Individual Contributions				6. Transfers Out	AI ENDITORES
	d (from Schedule A)): \$	(1a)	a. Itemized (from Schedule B)	: \$(6a)
b. Not-Iten	nized:	\$ <u>4378.00</u>	(1b)	b. Not-Itemized:	\$(6b)
2. Transfers In				7. Loans Made	
a. Itemized	d (from Schedule A)): \$	(2a)	a. Itemized (from Schedule B)	: \$(7a)
b. Not-Iten	nized:	\$	(2b)	b. Not-Itemized:	\$(7b)
3. Loans Recei		v. č	(2-)	8. Expenditures	. ć (9a)
	d (from Schedule A)):	(3a) (3b)	a. Itemized (from Schedule B)b. Not-Itemized	\$ (8a) \$ 4198.54 (8b)
b. Not-Itemized \$(3b) 4. Other Receipts				9. Independent Expenditures	\$(ou)
	d (from Schedule A)): \$	(4a)	a. Itemized (from Schedule B-	-9): \$(9a)
b. Not-Iter	nized	\$	(4b)	b. Not-Itemized	\$(9b)
TOTAL RECI	EIPTS (1a thru 4b)	\$ 4378.00	(TR)	TOTAL EXPENDITURES (6a thr	u 9b)\$_4198.54(TE)
1	*******	*******	*****	**************************************	AND OBLIGATIONS
	l (from Schedule I):	\$	(5a)	10. a. Itemized (from Schedule C):	
b. Not-Itemized		\$	(5b)	b. Not-Itemized	\$(10b)
TOTAL IN-KIND (5a + 5b)		\$	(TI)	TOTAL DEBTS & OBLIGATIONS	\$
********	******	******	******	**************************************	
Name and ac	ddress of person su nmittee's Chair or 1	Cash available at beginnin reporting per			
				Total Receipts from Section A (
					(B): \$(C)
<u> </u>				Total Expenditures from Section B (
				Funds available at clos reporting period (C minus	-
				Investments total (if applical	ole): \$(F)

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE



dotloop verified 01/18/22 1:26 AM CST HKNA-VACZ-QHQV-R4CY